



## DEPARTMENT OF PERMITTING SERVICES

Douglas M. Duncan  
County Executive

Robert C. Hubbard  
Director

<b>PERFORMANCE BOND</b>	<input type="checkbox"/> Sed Cntl <input type="checkbox"/> GP <input type="checkbox"/> DW	<b>Permit No:</b>  <b>Track No:</b>
	<input type="checkbox"/> Demolition <input type="checkbox"/> <input type="checkbox"/>	

KNOW ALL MEN BY THESE PRESENTS, that we \_\_\_\_\_  
\_\_\_\_\_ Hereinafter called PERMITTEE, and \_\_\_\_\_  
\_\_\_\_\_, a corporation incorporated under the laws of the State of \_\_\_\_\_, hereinafter called SURETY,  
are firmly bound unto Montgomery County, Maryland ("THE COUNTY") in the sum of \_\_\_\_\_  
(\$ \_\_\_\_\_) Dollars, to be paid to  
THE COUNTY or its assigns, upon the conditions set forth below. This bond is binding on ourselves, our personal representatives, successors, and  
assigns, jointly and severally.

WHEREAS, it is a condition of approval and issuance of the permit referenced above that a bond or other instrument be issued for the  
benefit of THE COUNTY, guaranteeing performance of the work described in the permit and as may be required by law.

NOW THEREFORE, the condition of this obligation is such that, providing that the PERMITTEE shall perform all work according to the  
stated terms and conditions of the above referenced permit, and comply with all requirements of law, then this obligation shall be null and void. But  
in the event that the PERMITTEE fails to complete the work in accordance with the terms and conditions of the permit and applicable law, then  
upon written notice of default from THE COUNTY or its designee to the PERMITTEE and the SURETY, the SURETY shall promptly take one of  
the following actions:

- 1) Undertake to complete or correct the work or arrange for its completion or correction at its sole expense; or
- 2) Pay the county to complete or correct the work up to the full penal sum of the bond.

If the SURETY does not respond within ten business days after receiving the COUNTY's notice of default, the COUNTY shall be entitled to enforce  
any remedy available to the COUNTY, including completing or correcting the work and seeking reimbursement from the SURETY, up to the full  
penal sum of the bond.

SEALED WITH OUR RESPECTIVE SEALS AND DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_.

ATTEST:	
_____ Witness Signature	_____ Permittee Signature (If Corporation, must be signed by President)
_____ Witness (printed name & title)	_____ Permittee (printed name)
	_____ Title

Insurance Company/Address/Phone/Fax/E-Mail:	_____ Name of Surety
	_____ Bond Number
Agency/Address/Phone/Fax/E-mail:	_____ Attorney-in-Fact Signature
	_____ Attorney-in-Fact (printed name)

Ver.09/2003

Form Correct \_\_\_\_\_

This form has been approved as to form and legality by the Office of the County Attorney. This form may not be modified without the approval of the Office of the  
County Attorney